

The Efforts Of Médecins Sans Frontières In Dealing With The Humanitarian Crisis In Ukraine Due To The Russian-Ukrainian Conflict 2022-2023

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ABSTRACT

A humanitarian crisis is defined as an event that poses a major threat to human beings, including the health, safety, security or welfare of a community or large group of people, usually covering a large area. This research aims to see how MSF's efforts in handling the humanitarian crisis in Ukraine due to the Russian-Ukrainian conflict 2022-2023. This research uses the concepts of INGO and Human Security to analyze the actors and circumstances of Ukrainian society. The method used is qualitative research with data collection using library research techniques, the data source used is secondary data, this data is obtained from literature studies such as various scientific papers, books, journals, articles and theses that are adjusted to the research discussed. The humanitarian crisis in Ukraine was caused by the conflict that occurred between Russia-Ukraine in 2022-2023. This can be seen from the conflict resulting in the decline of human rights that are violated widespread and systematically, causing great suffering to the civilian population. For example, civilian casualties, refugees, destruction of infrastructure (health facilities, education, transportation, water and electricity), food shortages (disruption of the food supply chain and clean water), human rights violations, spread of diseases and others. The results of this study show that MSF's efforts to deal with the humanitarian crisis in Ukraine due to the Russian-ukrainian conflict 2022-2023 by mobilizing health service resources, innovations in the health sector, and cooperation with other actors (WHO, UNHCR, and ICRC).

Keywords : Humanitarian crisis, Russia-Ukraine conflict, MSF in Ukraine

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1. INTRODUCTION

Previously, international phenomena were limited to issues of conflict and security between countries, with the primary actor being the state. However, the increasingly rapid development of globalization has brought many new aspects to human life worldwide. This phenomenon has led to a broader range of international issues. One issue that has attracted the attention of the international community is humanitarian issues. According to the United Nations Human Rights Council, a humanitarian crisis is an event that stems from conflict between people, natural disasters, or various events that result in a decline in human rights. Therefore, a humanitarian crisis can be seen as an event that poses a significant threat to human life, specifically the health, safety, security, and well-being of a community or large group of people, usually over a large territory (hidayat fahrul, 2023).

Russia and Ukraine have a long historical relationship. Many observers believe that of all post-Soviet states, Ukraine's independence was the most difficult for Russia to accept. Furthermore, many Russians traditionally consider most of Ukraine a historical province of Russia and the Ukrainian people as close ethnic kin (Domanska, 2021). The conflict between Russia and Ukraine has been ongoing for quite some time. The two countries first clashed in 2014 over the territorial dispute over

the Crimean Peninsula, which ultimately resulted in Russia's forcible seizure of the territory. In November 2021, Russia began building up its military presence along the border between the two countries, further fueling tensions. Consequently, on February 24, 2022, Russia invaded Ukraine, after Russian President Vladimir Putin declared war on Ukraine (Najmi & Lestiyaningsih, 2022).

The humanitarian crisis in Ukraine stemmed from the conflict between Russia and Ukraine on February 22, 2022. This conflict resulted in widespread and systematic human rights violations, causing significant suffering among the civilian population. These include civilian casualties, displacement, destruction of infrastructure (healthcare, education, transportation, water, and electricity), food shortages (disruptions to the food and clean water supply chain), human rights violations, the spread of disease, and more. The escalating international armed conflict in Ukraine has resulted in civilian casualties and the destruction of public facilities, forcing people to flee their homes in search of protection and assistance (Essar et al., 2022).

By the end of 2022, 6.5 million people were internally displaced in Ukraine, and approximately 8 million had fled abroad, including to the Czech Republic, Hungary, Poland, the Republic of Moldova, Romania, and Slovakia (UNHCR, 2022). The conflict has also directly impacted transportation infrastructure and homes due to Russian attacks. Furthermore, government buildings and hospitals have also been targeted by Russian military attacks. As of March 2022, Russian military attacks had captured and destroyed 4,431 homes, 260 bridges, and more than 8,000 roads. Meanwhile, the Russian army has damaged, seized, and destroyed 92 factories and businesses, 378 educational institutions, 138 medical facilities, 2 ports, 12 military and civilian airports, and 8 power plants, including a nuclear power plant (Ayufajari, 2022).

Humanitarian crises are serious challenges that the international community can face in various ways, ranging from global health challenges such as pandemics and armed conflicts to natural disasters. In these situations, the involvement of international organizations is crucial because they have the capacity, resources, and global legitimacy to provide a coordinated and effective response (Sari & Siahaan, 2022). The situation in Ukraine is the background to the formation of an INGO (International Non-Governmental Organization) engaged in medical humanitarian assistance, namely MSF (Médecins Sans Frontières), to help resolve the humanitarian crisis in Ukraine. As an NGO, MSF was first founded in 1971 in France by a group of doctors and journalists following the conflict and famine in Biafra, Nigeria. Thirteen founding doctors and journalists were among the 300 volunteers (nurses, doctors, and other staff) who formed the organization at that time. The company was founded with the aim of concentrating on providing emergency medical assistance in the field quickly, efficiently, and fairly (MSF, 2023a). MSF's presence in Ukraine has been in place for quite some time, dating back to 1999, specifically in Eastern Ukraine, where its focus was assisting the Ukrainian Ministry of Health in addressing HIV and tuberculosis cases. The aftermath of the Russia-Ukraine conflict created an emergency situation, prompting MSF to suspend its previous activities and focus on assisting the Ukrainian population affected by the conflict (Dzhush & Golovach, 2023).

This study aims to understand MSF's efforts in addressing the humanitarian crisis in Ukraine resulting from the 2022-2023 Russia-Ukraine conflict. The humanitarian crisis in Ukraine caused by the Russia-Ukraine conflict has significantly impacted the lives of Ukrainians, particularly in accessing healthcare. The conflict has destroyed much of the infrastructure and healthcare facilities, making it extremely difficult for Ukrainians to access healthcare, both those affected by the conflict and those temporarily suffering from other illnesses.

2. LITERATURE REVIEW

In the current era of rapid globalization, issues within the study of International Relations are becoming increasingly diverse. Frequently discussed issues include low politics, encompassing several issues. Humanitarianism, for example, has been a topic of intense discussion in recent years. This phenomenon has led to the emergence of various actors within the study of International Relations, working within its fields.

A. The Concept of INGOs

International Non-Governmental Organizations (INGOs) are one of the actors in the study of international relations, alongside states, that play a significant role. This is inseparable from the numerous cross-border activities undertaken by the international community. Furthermore, the expanding scientific knowledge positions INGOs as important actors in international relations, standing independently. In their activities, INGOs provide assistance tailored to the issues facing communities, with the full approval of authorities in the region in need (Wilkinson, 2007).

Umar S. Bakry divides international organizations into two categories based on their nature: IGOs (Intergovernmental Organizations), which consist of several sovereign states and have a clear organizational structure. These groups meet regularly. Because IGO membership is usually voluntary, their existence does not threaten state sovereignty. Second, there are NGOs (Non-Governmental Organizations), which are defined by the Yearbook of International Organizations as organizations that operate internationally, are structured, and do not have official ties to any national government (Hasanah et al., 2015). By definition, Médecins Sans Frontières (MSF) is a non-governmental organization (NGO) that provides high-quality medical services (including medical facilities, medicines, and care) to individuals in need, regardless of their political, religious, or racial affiliation. This is because MSF is a worldwide non-governmental organization that is not officially affiliated with any national government.

According to David Lewis and Nazneen Kanji (2001), NGOs play three key roles in their operations: implementers, catalysts, and partners (Damayanti, 2020):

1) *Implementers*

NGOs, as implementers, play a role in mobilizing various assets in the provision of products and services to individuals in need. This is done to support issues such as welfare, health, agribusiness, the environment, human rights, and others. In implementing programs, NGOs can act in accordance with existing program understandings or in accordance with agreements made between the NGO and collaborating parties, whether governments or donors.

2) *Catalysts*

As change specialists who can motivate, encourage, and contribute to advancing unused standards and values and creating change in existing problems. NGOs worldwide can thus be seen as actors capable of bringing about change, either through promotion or progress toward finding solutions to problems. The catalyst component is one of the capabilities of NGOs, which can be directed at individuals or groups in the surrounding community, or among other actors such as the government, the private sector, or donors.

3) *Partners*

NGOs strive to collaborate with other parties while simultaneously sharing the risks with their partners. The third point, regarding partners, is a growing trend among NGOs, collaborating with governments, donors, and the private sector to provide input into multi-program or broader program endeavors.

MSF (Médecins Sans Frontières) is one of the global NGOs involved in medical humanitarianism, and is based on the INGO concept as defined by David Lewis and Nazneen Kanzi. First, MSF helps mobilize various resources during the initial implementation as an implementer. It assists in the mobilization of various resources and the provision of medical supplies and services to Ukrainian citizens in need of medical attention. Second, in assisting the Ukrainian community, MSF implements innovations in the health sector as solutions to improve healthcare services in Ukraine. As part of its innovation, MSF deployed trains as medical trains, hospitals, and mobile clinics to assist the Ukrainian people in accessing healthcare. Following this innovation, MSF provided training to healthcare staff in physiotherapy, psychology, and emergency departments, in providing healthcare services. Finally, as a Partner, MSF collaborates with various actors, such as the Ukrainian government, local NGOs, and donors, to assist in providing medical assistance and healthcare services to the Ukrainian people.

B. Human Security

The concept of human security is gaining increasing attention because it views states as excessively characterizing, creating, and actualizing security approaches based on regional, military, and political strength, completely replacing the need for broader security for everyone (Adinda FA, 2019). The evolving definition of human security reflects a shift in security issues, from previously limited to military security, territorial defense, and the state. Avoiding conflict is only one aspect of developing security or safety; humanitarian concerns must also be taken into account. Human trafficking, global warming, hunger, poverty, terrorism, the spread of disease, and so on are examples of issues that fall under the human security umbrella (Mumtazinur & Sri Wahyuni, 2021).

Human security was defined by the United Nations Development Program (UNDP) in 1994. It has seven components: personal/individual security, environmental security, food security, health security, and economic security. It also encompasses political security and community security. Furthermore, the seven elements of human security can be viewed as potential threats to human safety (Umar Suryadi Bakry, 2022). Barry Buzan, an expert from the Copenhagen School, defines security as no longer solely focused on state security, but also on community security. He believes that security should be interpreted more broadly as freedom from specific threats, through cooperation between the state and society in maintaining its independent identity (Sudiar, 2019).

In line with what the UNDP and Barry Buzan have stated, scientific developments and the current era have brought about changes in human life. Therefore, the definition of security after the world war began to shift and become broader. For example, community welfare is related to health, both those affected by disease and those affected by interstate conflict. This is crucial to discuss because the impact of disease and interstate conflict on people's lives, as access to healthcare is crucial for their survival.

In this paper, the author focuses on Health Security and Personal/Individual Security to explain the conditions of communities affected by the Russia-Ukraine conflict. The situation experienced by the Ukrainian people due to the conflict has had a significant impact on the health and security of individual Ukrainians. The Russian military attack on February 24, 2022, caused thousands of civilian casualties and massive damage to energy and other critical infrastructure such as homes, public services and health services, as well as water and electricity supplies. The destruction of the health care system due to the conflict has impacted the lives of the Ukrainian people, making it very difficult for people to access good health care for intensive treatment or care, both due to the conflict and due to other chronic diseases. In addition, the conditions of the people in Ukraine are experiencing great difficulties, this is seen from the destruction caused by the conflict, which has limited people's access to public facilities, food, clean water, and medicines. This situation has impacted the survival of the Ukrainian people, where the lives of Ukrainian people are in fear of the conflict and do not live safely or peacefully.

3. METHOD

According to Sugiyono (2012), a research method is a scientific process for obtaining data with a purpose and purpose. Meanwhile, Creswell (2014) explains that qualitative research is a method for examining and understanding the meaning of individuals or groups related to social or human issues (Fauzi & dkk, 2022).

A. Data Sources

Data sources are basically divided into several parts: primary data sources obtained from direct observation, while secondary data sources are obtained from various library sources or literature studies, including books and other materials (Sugiyono, 2018). The author's data source for this research is secondary data, derived from literature studies of various scientific works, including books, journals, articles, and theses relevant to the research discussed.

B. Data Collection Techniques

The data collection technique used by the author is library research. According to Sutrisno Hadi, library research techniques define this type of research as a study that draws its object of study from library data, using books and other sources as data sources (Nursapia Harahap, 2014). Data collection techniques are one way to gather data from previous research or data sources. In this paper, the author used a literature study to collect data. This data collection technique, using the literature study method, was carried out by seeking sources from books, journals, articles, or other scientific works. This allows the author to obtain data that can be holistically/contextually answered using the collected data as a reference.

C. Data Analysis Techniques

According to Creswell (2010), data analysis in qualitative research refers to the researcher's efforts to comprehensively analyze data, both in text and visual form. For data to be studied, understood, presented, and evaluated, the researcher must thoroughly prepare it. The data analysis process in this study focuses on efforts to accurately dig up facts to deepen the study by analyzing previously presented data, then processing it to obtain an appropriate conclusion (Hardani et al., 2020).

4. RESULTS AND DISCUSSION

In addressing the humanitarian crisis in Ukraine resulting from the Russia-Ukraine conflict, MSF mobilized healthcare resources, implemented health innovations, and collaborated with other actors (the Ukrainian government, local volunteers, and international organizations such as the WHO, UNHCR, and ICRC). These efforts aimed to assist in providing medical assistance and healthcare services to the Ukrainian people.

A. Healthcare Resource Mobilization

The outbreak of the Russia-Ukraine conflict on February 24, 2022, created an emergency situation in Ukraine, prompting MSF to focus on assisting the conflict-affected Ukrainian population. MSF provided various medical needs to the conflict-affected Ukrainian population by mobilizing healthcare resources. The purpose of MSF's healthcare resource mobilization was the devastating impact of the Russia-Ukraine conflict, particularly on the healthcare sector. In mobilizing healthcare resources, MSF coordinates with the Ukrainian government and local Ukrainian organizations on the front lines (conflict areas) to identify the needs of conflict-affected populations (MSF, 2023a).

Since April 2022, MSF has delivered over 225 metric tons of medical supplies and aid to Ukraine. Most of this has been delivered to hospitals and health centers, or to the Ministry of Health for transport to areas most in need. By the end of 2022, MSF had delivered over 800 metric tons of

medical supplies and aid to Ukraine to support hospitals, health centers, and refugees. Furthermore, in 2022, approximately 116 MSF staff collaborated with 685 Ukrainian staff to assist and reach the Ukrainian population in accessing healthcare. Approximately 339 MSF employees were employed in Ukraine in 2023 as medical professionals (nurses, doctors, and surgeons); psychologists; logisticians; administrators; and management based in Apostolová, Dnipro, Ivano-Frankivsk, Kharkiv, Kyiv, Lyman, Lviv, Mykolaiv, Odessa, Poltava, Pokrovsk, Kochubeivka, Kostiantynivka, Kryvyi Rih, Uzhorod, Kropyvnytskyi, Vinnytsia, Zaporizhzhia, and Zhytomyr (MSF, 2023b).

MSF is an international NGO specializing in medical humanitarianism. In responding to the humanitarian crisis in Ukraine caused by the Russia-Ukraine conflict, MSF assists and reaches out to the Ukrainian population affected by the conflict, particularly in frontline areas. This aims to provide health services to the community. The following are some of MSF's responses (MSF, 2024):

1) Mobile Clinics

MSF operates mobile clinics to provide basic healthcare, psychological counseling and social services, reproductive health services, mental health care, and health promotion. MSF teams also contribute to the rehabilitation of healthcare facilities damaged during the fighting. Through these mobile clinics, MSF teams provide medication to people with chronic conditions such as hypertension, asthma, diabetes, heart disease, and epilepsy. MSF teams also refer critically ill patients to hospitals, provide psychological first aid and mental health consultations, and distribute essential relief items. Most mobile clinic patients are elderly people who are unwilling or unable to leave their homes, especially in areas most affected by the fighting, such as Donetsk, Kherson, and Mykolaiv, which are located near the front lines.

2) Emergency Room, Intensive Care, and Surgical Interventions

Surgical and trauma care in Kherson is supported by MSF medical teams. From July 2022 to December 2023, MSF supported Kostiantynivka Hospital. MSF teams established an emergency unit, added two beds to the ICU, and created an operating room to operate an emergency trauma facility. However, MSF's presence in the region has been reduced due to ongoing shelling in Kostiantynivka. While MSF's presence in Kostiantynivka and Selydove has been reduced, mobile emergency response teams for mass casualty incidents remain ready. Most hospital admissions are related to violent trauma. In 2023, 17 percent of patients arriving at MSF-supported emergency units in Kostiantynivka and Kherson were considered "red cases," meaning they were in a life-threatening condition and required immediate treatment within 30-60 minutes of first medical contact.

3) Evacuation and Referrals

MSF operates medical evacuation trains and ambulances to evacuate patients from overloaded Ukrainian hospitals near the front lines so they can receive treatment in safer, larger-capacity hospitals elsewhere in the country. MSF teams' activities on the medical trains have been interrupted due to shifting dynamics between regions caused by the war. In addition, MSF teams are using 15 MSF ambulances to transport critically ill patients. MSF ambulances refer patients suffering from violence-related trauma to other hospitals for appropriate care. This is due to the ongoing pressure on Ukraine's healthcare system and the steady flow of patients requiring referral, particularly in the Donetsk, Kherson, Dnipropetrovsk, and Zaporizhzhia regions. Due to the conflict on the frontlines in eastern and southern Ukraine, the healthcare system is failing to meet the medical needs of the people in these areas.

4) Rehabilitation (Physiotherapy and Psychological Care)

During the war across Ukraine, MSF teams provided physiotherapy training to staff who assisted in the physical rehabilitation of injured patients. However, MSF's training program was

limited to a hospital in Kharkiv. MSF also conducted an early rehabilitation project for war-wounded patients in the Cherkasy and Zhytomyr regions. At the Cherkasy Ministry of Health hospital, MSF teams provided support with a multidisciplinary approach, including physiotherapy, psychological care, and nursing. In addition, we provided training and technical assistance to health institutions in Zhytomyr.

5) PTSD (*Post-Traumatic Stress Disorder*)

In 2023, MSF began providing specialized psychotherapy services for people experiencing symptoms of war-related post-traumatic stress disorder (PTSD) in Vinnytsia. A specially designed mental health center opened in September of this year. MSF offers psychological sessions for individuals and members of the patient support network. MSF's specialist team provides patients with techniques to help reduce and prevent worsening of symptoms, enhance coping skills, improve interpersonal functioning, and alleviate the consequences of traumatic stress.

Table 1. MSF Response in Ukraine 2022-2023

MSF Response in Ukraine 2022-2023	
Mobile Clinic	• 12,724 mental health consultations • 59,567 primary health consultations • 3,806 sexual and reproductive health consultations
Emergency Room, ICU, and Surgical Intervention	• 1,991 emergency room consultations • 429 surgical interventions assisted or performed by MSF • 588 patients treated in the emergency department for trauma from violence
Ambulance and Referral	• 10,543 patient referrals via ambulance • 57 percent of patients with violent trauma were referred via ambulance • 137 trips via medical train • 3,808 patients in medical trains • 310 patients in the ICU car on medical trains
Physiotherapy	• 4,393 physiotherapy sessions • 292 physiotherapy patients
PTSD (<i>Post-Traumatic Stress Disorder</i>)	• 778 counseling sessions • 237 PTSD (Post-Traumatic Stress Disorder) patients

B. Innovation in Healthcare

Innovation in healthcare to assist the conflict-affected population of Ukraine, MSF equipped and managed a train to care for patients requiring medical evacuation from war-affected areas in eastern Ukraine, in collaboration with the Ukrainian Ministry of Health and the National Railways (Walravens et al., 2023). A Ukrainian railway train was modified to serve as a medical train for ground transportation to evacuate and care for conflict-affected populations. This modified medical train has eight carriages: one carriage with five intensive care unit (ICU) beds, two of which offer invasive

mechanical ventilation, two carriages with nine beds for non-outpatients, one regular sleeper carriage, and one carriage with beds and mattresses for outpatients with less severe conditions. The remaining three carriages are for staff, medical supplies, oxygen generators, and an uninterruptible power supply necessary to enable ICU transport (Maurizio Debanne, 2022).

Following the medical train's modification, the personnel working on the train, in addition to MSF staff, are largely local individuals recruited to staff the train. These include doctors with ICU experience, nurses, nursing assistants, technical logisticians, and translators. The staffing has increased over time, allowing for more rotations and more nurses per patient. MSF staff consists of a project coordinator, an emergency/ICU physician, a nurse manager, and, after the launch of the follow-up train, an ICU nurse. Local staff are being trained to gradually take over some of these positions. Ukrainian Railways staff remain responsible for the train's routine functions and movements.

MSF operates medical evacuation trains to safely transport patients from overloaded hospitals near the front lines to safer, larger-capacity facilities. The medical train began operations on March 28, 2022, and has completed 79 trips in 2022, referring 2,558 patients. Of these, 700 were trauma patients, and 136 were treated in the train's intensive care car. So far, in 2023, the medical train has referred 216 patients on 11 trips along with family members or caregivers accompanying the patients on all train trips (MSF, 2024).

C. MSF's Collaboration with Other Actors in Supporting Health Services

MSF is assisting the Ukrainian people in accessing health services due to the conflict. MSF is collaborating with the Ukrainian government, local Ukrainian organizations, and international organizations to assist the conflict-affected Ukrainian population in accessing health services. The primary goal of MSF's collaboration with these actors is to provide rapid, effective, and sustainable assistance to victims of the conflict.

1) MSF and Government Collaboration

The collaboration between the Ukrainian government and Médecins Sans Frontières (MSF) is crucial in providing medical and humanitarian assistance amidst the ongoing conflict. This collaboration encompasses various aspects, including the provision of medical services, training of local medical staff, and logistical and infrastructure support to ensure adequate healthcare for the war-affected population (MSF, 2022a).

2) MSF Collaboration with Local Ukrainian Organizations

Collaboration between Médecins Sans Frontières (MSF) and local organizations in Ukraine is crucial for expanding the reach of humanitarian assistance and ensuring a proper response to the health crisis caused by the conflict. The following are some forms of this collaboration: Collaboration with local hospitals, support for local volunteers, cooperation in mental health services, distribution of non-medical assistance, training and capacity building (MSF, 2022b).

3) MSF Collaboration with International Organizations

Médecins Sans Frontières (MSF) collaborates with several international organizations to distribute humanitarian aid in Ukraine. This partnership enhances their ability to provide medical assistance, psychological support, and emergency services amidst the ongoing conflict.

a) *World Health Organization (WHO)*

Médecins Sans Frontières (MSF) and the World Health Organization (WHO) are collaborating extensively in Ukraine to address the severe humanitarian crisis caused by the ongoing conflict. Their efforts include providing medical care, training, and essential supplies to mitigate the health impacts on affected populations, particularly in areas where health

infrastructure has been severely impacted by the war. The collaboration between MSF and WHO in Ukraine is crucial in meeting urgent public health needs and supporting the long-term recovery of the country's health care system (WHO, 2022).

b) *United Nations High Commissioner for Refugees (UNHCR)*

The collaboration with UNHCR helps MSF support internally displaced persons (IDPs) by providing essential medical care, psychological support, and non-food items such as hygiene kits and warm clothing. This partnership also helps manage refugee flows and ensure the safety and well-being of the displaced population. This collaboration demonstrates how medical and humanitarian organizations can work together to accelerate crisis responses and ensure that aid reaches those most in need quickly and effectively. In refugee camps, UNHCR is responsible for providing shelter and security, while MSF provides comprehensive health services, including vaccinations, maternal and child care, and infectious disease management (UNHCR, 2022).

c) *International Committee of the Red Cross (ICRC)*

MSF and the ICRC frequently coordinate on the ground to respond to mass casualty incidents and provide urgent medical assistance to conflict-affected populations. This includes the provision of surgical equipment, trauma care, and training for local health workers on the management of war injuries. One example of recent collaboration is the development of the "Interagency Integrated Triage Tool" (IITT). This tool was created to assist in the triage process, namely the assessment and prioritization of patients based on the urgency of medical intervention. It can be used at various healthcare access points such as ambulances and hospitals (ICRC, 2022).

5. CONCLUSION

MSF is addressing the humanitarian crisis in Ukraine caused by the conflict between the two countries by mobilizing healthcare resources to help the Ukrainian people access healthcare. MSF operates mobile clinics, an Emergency Room (Intensive Care and Surgical Intervention), evacuation and referral services, and rehabilitation services such as physiotherapy and psychological care, as well as PTSD (Post-Traumatic Stress Disorder). Furthermore, MSF is innovating in the health sector by modifying a Ukrainian train to serve as a medical train. The medical train is used to assist in evacuating and treating victims of the conflict, particularly those living in frontline areas. In assisting the Ukrainian people, MSF collaborates with other actors such as the Ukrainian government, local organizations, and international organizations (WHO, UNHCR, and ICRC) to provide rapid, effective, and sustainable assistance to victims of the conflict. It can be concluded that Médecins Sans Frontières (MSF)'s efforts in addressing the humanitarian crisis in Ukraine resulting from the 2022-2023 Russia-Ukraine conflict focused on helping the Ukrainian people gain access to healthcare. This aligns with MSF's goal as an independent organization focused on providing emergency medical assistance in the field quickly, effectively, and impartially. At the time of this research, MSF remained consistent in assisting the Ukrainian people in accessing healthcare.

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